

State Form 4606 (R9 /11-99)

Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes No

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

	_	THE LATER BUILDING	The Control of the Co
COMMITTEE	INFORMATION		
1. Full name of committee (as on Statement of Organization) Check if this is a ne		CEPACIES IN COLUMN B. C	LIA grander) jetter sid no
	And the second second		
Acronym or abbreviated name, if any	3. Committee t) 844-8076	Election Based the number
4. Mailing address (address where all campaign finance correspondence is received)	Check if this is a new	vaddress	POTAL PAGES: Enter the including any absorbed solt
		on (if applicable)	
CARMEL IN 46032	REPL	IBLICAN	
· CANDIDATE INFORMATION (Fo	r Candidate's Commi	ttees Only)	
7. Full name of candidate (include any nickname)		on or if independent	mon Aut edit staß if MGTI
WAYNE ALAN WILSON	REP	UBLICAN	APO moži notstineni ic
 Office sought (Include district number, if any. Not required for exploratory committee. 		esidence 71LTON	new accompany to accomp
TYPE OF REPORT		CONVENTION	ON CANDIDATES ONLY
11. Check one:	(tedmun androa)	Check one:	ell training by the
Pre-Primary Pre-Election Annual Final / Disbands Committee (lines 18	3, 19, and 20 must be "0")	Pre-Convent	ion
Outgoing Treasurer (within 10 days amend Statement of Organization)		Post-Conven	tion
12. Reporting period: From: 10-27-01 Through: 12-31-0	perios ven a ses	COLUMN A This Period	COLUMN B Year to Date
 Cash on hand and investments at the beginning of this reporting period. 	ZERO	7.500	
4. Cash on hand and investments January 1, current year.	2560		7.820
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cast	h contributions.)		
15a. Itemized (use Schedule A)		3610.00	3610,00
15b. Unitemized	catabitoso arti co	125,00	125.00
15c. Add lines 15a, and 15b in both columns	SUBTOTAL	3735.00	3735.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	3735.00	3735.00
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)	Also hadestile burst	105.04	ZERO
17a. Itemized (use Schedule B) (Public Question; use Schedule C)	Insulational aut mate	ZERO	
17b. Uniternized	rientray A "Imbres	94.15	94.15
17c. Add lines 17a and 17b in both columns	SUBTOTAL	94.15	94.15
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in	hoth columns) TOTAL	3640.85	3640.85
	out columns)	ZERO	
19. Debts OWED BY the committee (use Schedule D)	Fried, Dieselot	ZERO	SERVICE REPORT
20. Debts OWED TO the committee (use Schedule E)	Annual Light	~~~	为外线的是类型物质定型的心理

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Signature on File

FOR OFFICE USE ONLY

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose.

(IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIMDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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15-28-65	2	10	14
Page	2	of1O	_

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVE
(street, number, city, state, ZIP code) 1. JOHN KOUEN	Contributions: ☐ Direct ☐ In-Kind (describe)	PERIOD	YEAR-TO-DATE	on Roy will make
CARMEL IN 46033 Contributor's Occupation (if required) CONSULTANT	Other Receipts: ☐ Interest ☐ Loan ☐ Misc (specify)	1,000.00	M: Enter the all committee for Man anta	WAYNE WILSON
JOHN SHULER	Contributions: ☐ Direct ☐ In-Kind (describe)	HIG RO H	NTURBITION DESCRIPTION OF PROCERT FR	12/20/61
Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc (specify)	500.00	VETA JUNEA	MILSON
3. A service at young with an emap out of 8 and	Contributions: Direct In-Kind (describe)	sbasico do	is to hege;	teril edi a
Contributor's Occupation (if required)	Other Receipts: Interest □Loan Misc (specify)	de desponde	od the chack of the law to control with the chack of the	Meper sedimo we expirement
4. asimoto 8 car to specy and years at more II. A slubado 8 to specy	Contributions: Direct In-Kind (describe)	F SCHEDBL	HS PAGE D	EBTOTAL TO
Contributor's Occupation (if required)	Other Receipts: Interest □Loan Misc (speally)	SCHEDUL Inter this figure	L PAGES O	all pages on Sc
5. ·	Contributions: Direct In-Kind (describe)			
Contributor's Occupation (if required)	Other Receipts: Interest □ Loan Misc (specify)			
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TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM 15a of the Summa	A ON THE LAST PAGE ONLY	•		



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED BY
1.	THE LINDER COMPANY 8555 N. RIVER ROAD	Contributions: Direct In-Kind (describe)	is to semble i	mico bas em	12-17-01
one?	INDIANAPOLIS IN 46240	Other Receipts: Interest Loan Misc (specify)	1,000.00	uins nemy	WILSON
2.	CARMEL CLEANERS	Contributions: Direct In-Kind (describe)	on at yed a	i) bolivoid to	12-19-01
85:31	N'ELSON AND FRANKENBERGET	Other Receipts:	500,00	/ITA JUMU;	WAYNE
3.	N'ELSON AND FRANKENBERGET 3021 E-98 TH Street	Contributions: Direct In-Kind (describe)	eli calendar	report of a	12-26-01
Jan 185	INDIANAPOUS IN 46280	Other Receipts: Interest Loan Misc (specify)	500.00	e received will be two barrisdes in 1870: Enter	WAYNE WILSON
4.	cores and to appreciate years a study of a repleasable to appeal and	Contributions: Direct In-Kind (describe)	SCHEDUL AL DE ALL E	NS PAGE C	LATOTEL TATOTEL TAT
	ay Steat	Other Receipts: Interest □Loan Misc (specify)	enter this rigury	SEA A slubert	o un cubitat in
5.		Contributions: Direct In-Kind (describe)			
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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(SI-1-8-6 OI) settlemes on to her an income of the	Other Receipts: Interest □Loan □Misc (specify)	e movey outer a la race near dismose, acc	bed in creek the bed and the last Trial	entributions a
4 M. Into and to apply one your instant it. A shadow to apply a page of the pa	Contributions: Direct In-Kind (describe)	F SCHEDU	MS PAGE	LATOTEUS SE A PARTO A TALLACTO
	Other Receipts: Interest □ Loan Misc (specify)	Opt and worse	A A SUDDAY	no zapisą (m.
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc (specify)			
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipt

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfersin and in-kind contributions regardless of the amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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Page _	5	of _	10	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVE RECEIVED BY
COMMITTEE TO ELECT WAYNE WILSON CITY COUNCIL CARMEL	Contributions: Direct In-Kind (describe)	earbha priliam stare (cardida) et aynount	ana emisa ika e ampo lapidioq a ampirmajen bes	12-3-01
CARMEL IN 44033 (CLOSE OUT OF FORMER COMMITTEE)	Other Receipts: Interest Loan Misc (specify) INAL CFA-H F	110.00		WAYNE
2. Francis d'outres	Contributions: Direct In-Kind (describe)	SANW PROGRAM ES	submit and (sa	
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of the amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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Page _	6	of	10	400

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
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	Other Receipts: Interest Loan Misc (specify)	DOO E MINESON	a selfenmas	Reported
count over \$100 within a colerator year (\$200 if manifer and	Contributions: Direct In-Kind (describe)	lle davibbs ga byed odsy asis	atin and ome	Enter the full parties of T
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE B) **Itemized Expenditures**

FILE NUMBER					
Page	7	of	10	PL	

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this INSTINUCTIONS: Please type or print regiony in BLACK link all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code	d gallocal tre street are one to reper sed all of	Direct In-Kind Payment of Debt Returned Contribution Other	e postropeo es de accesso a se	file med test mign files a most tax accordance to be	Selected a to
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State Form 4506 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURE

For Public Questions

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printer)	hy or ba	do si ob	borbe.	aid?
Page	8	of	10	

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

COMMITTEE ELECT WAYNE WILSON IN 2003 PUBLIC QUESTION INFORMATION **Enter Text of Public Question** Type of Question: ☐ Statewide ☐ Local Position: ☐ Supported ☐ Opposed PURPOSE OF EXPENDITURE TYPE OF COLUMN A COLUMN B RECIPIENT'S NAME AND MAILING ADDRESS DATE OF (be specific) CUMULATIVE EXPENDITURE AMOUNT THIS (street, number, city, state, ZIP code) EXPENDITURE PERIOD YEAR-TO-DATE ☐ Direct ☐ In-Kind Direct ☐ In-Kind ONE ☐ Direct ☐ In-Kind Direc ☐ In-Kind Direct ☐ In-Kind ☐ Direct ☐ In-Kind

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TOTAL OF ALL PAGES OF SCHEDULE C ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)

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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE D) Debts Owed by This Committee

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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT CUMULATIV INCURRED PAID YEAR-TO-DA	BALANCE THIS
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(CFA-4 SCHEDULE E) **DEBTS OWED TO THIS COMMITTEE** FILE NUMBER

State Form 4606 (R9 / 11-99)	
Indiana Election Commission	(IC 3-9-5-14
Approved by State Board of A	ccounts 199

10	16	_

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts, loans, regardless of amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

Committee To	Elect	WAYNE WILSON	11	2003
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BORROWER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	CO-SIGNER'S NAME AND MAILING ADDRESS(if any) (street, number, city state, ZIP code)	ORIGINAL AMOUNT NATURE OF DEBT	DATE DEBT - INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THI PERIOD
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